



INCENTIVE AWARDS

The National Guard Incentive Awards Program is designed to motivate technicians of the National Guard to increase productivity and creativity and to achieve greater efficiency, economy, and improvement of operations. It also provides a method for rewarding those members whose job performance and ideas are substantially above normal job requirements and performance standards.



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INCENTIVE AWARDS REGULATIONS

- Title 5, Part III, Subpart C, Chapter 45, Subchapter I
- Provision of Technician Personnel Regulation 451 (TPR 451)
- HROR (TN) 690-1



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INCENTIVE AWARDS

MONETARY AWARDS



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AWARDS COMMITTEE

- The Human Resources Officer (HRO) will appoint an Awards Program Committee.
- The committee will consist of a President, at least two members and a non-voting administrative secretary.
- The committee will determine the validity and correctness of such awards with special attention to whether the action is routine or truly meritorious.



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AWARDS COMMITTEE

- The committee will screen the award recommendations for administrative accuracy and will forward only administratively correct award recommendations to the appropriate Assistant Adjutant General and then to The Adjutant General (TAG) for final approval.



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MONETARY AWARDS

- Quality Step Increase (QSI)
- Sustained Superior Performance (SSP)
- Cash Award
- Suggestion Award



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INCENTIVE AWARDS

QUALITY STEP INCREASE



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QUALITY STEP INCREASE

(QSI awards are for General Schedule (GS) grades only.)

- The technician's immediate supervisor is responsible for initiating an QSI award.
- The recommendation must be supported by all in-line supervisors through the Position Management Officer (PMO) to HRO.



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QUALITY STEP INCREASE

(QSI awards are for General Schedule (GS) grades only.)

- Denial of award may be for any subjective reason based on lack of merit, under PIP, inefficiency, or misconduct.
- If disapproved, the supervisor will return the recommendation to the originator, through channels, with a suitable explanation.
- If approved by the PMO, award recommendation will be forwarded to the HRO.



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SUBMISSION SUSPENSE

Recommendations for awards should be submitted with the annual performance ratings within 30 days of the last day of the rating period to allow processing time and meet the 60 day deadline for submission of recommendation of award in conjunction with annual performance rating.



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REQUIRED DOCUMENTS

- NGB FORM 32
- DETAILED STATEMENTS OF FACTS
- HRO 430-1 PERFORMANCE APPRAISAL & STANDARDS
- POSITION DESCRIPTION (PD)



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NGB FORM 32

The technician's immediate supervisor is responsible for initiating incentive award nomination using NGB Form 32. (Complete blocks 1 - 10 and the Position Manager's signature in Part IV.)

Page 1 of 2

RECOMMENDATION FOR INCENTIVE AWARD OR QUALITY SALARY INCREASE (The proponent is: NGB HR)				DATE	
I. (TO BE COMPLETED BY OPERATING OFFICE)					
1. TYPE OF RECOMMENDATION (COMMITTEE)					
2. BASIS FOR RECOMMENDATION (See reverse under "Evidence of Superior or Outstanding Achievement")					
☐ SUPERIOR PERFORMANCE		☐ SPECIAL ACT OR SERVICE		DATE OF ACT OR DATE CONTRIBUTION PUT INTO USE	
3. DUTY ASSIGNMENT - REASON FOR RECOMMENDATION (See reverse for details)		4. REASON FOR RECOMMENDATION (See reverse for details)			
5. DUTY ASSIGNMENT - REASON FOR RECOMMENDATION (See reverse for details)		6. DUTY ASSIGNMENT - REASON FOR RECOMMENDATION (See reverse for details)			
7. REASON FOR RECOMMENDATION (See reverse for details)		8. REASON FOR RECOMMENDATION (See reverse for details)			
9. REASON FOR RECOMMENDATION (See reverse for details)		10. REASON FOR RECOMMENDATION (See reverse for details)			
II. (TO BE COMPLETED BY TECHNICIAN PERSONNEL OFFICE)					
TYPE AND DATE OF INCENTIVE AWARD(S) OR DATE OF QUALITY INCREASE(S) PREVIOUSLY GRANTED (except length of service)					
III. (TO BE COMPLETED BY LOCAL AWARDS COMMITTEE)					
11. RECOMMEND APPROVAL OF FOLLOWING AWARDS		☐ CASH		TOTAL AMOUNT	
12. ☐ DISAPPROVED		REASON FOR DISAPPROVAL		DATE	
IV. (TO BE COMPLETED BY APPROPRIATE APPROVING AUTHORITY)					
APPROVING AUTHORITY	ACTION	ADDITIONAL CASH AWARD	SIGNATURE AND TITLE		DATE
LOCAL COMMANDER	☐ APPROVE ☐ DISAPPROVE	APPROVED	RECOMMENDED		
STATE AWARDS COMMITTEE	☐ APPROVE ☐ DISAPPROVE	APPROVED	RECOMMENDED		
ADJUTANT GENERAL	☐ APPROVE ☐ DISAPPROVE	APPROVED	RECOMMENDED		
NGB INCENTIVE AWARDS BOARD	☐ APPROVE ☐ DISAPPROVE	APPROVED	RECOMMENDED		
NOTICE TO EMPLOYEE					
UPON ACCEPTANCE OF CASH AWARDS, THE USE OF THIS CONTRIBUTION BY THE UNITED STATES SHALL NOT FORM THE BASIS OF A FURTHER CLAIM OF ANY NATURE UPON THE UNITED STATES BY YOU, YOUR WIFE OR ASSIGNS.					
1. Attach explanation					

NGB Form 32, APR 99, (Adobe v. 4.0) Previous editions are obsolete



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DETAILED STATEMENT OF FACTS

A draft of the proposed citation, written in third person and **not exceeding 70 words**. Use 8 ½ x 11 sheets. The statement should be factual, show how it exceeds the normal, indicate benefits resulted (preferably in dollar amounts or other tangible results), and include any other analysis or praise received. **The immediate supervisor must also certify, based on past experience, that it is believed the technician's high quality of performance is likely to continue.** If the technician has received a previous QSI or SSP, the justification for another such increase in the same grade and position must provide specific evidence of increased quality of performance over and beyond that on which the previous increase was warranted.



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PERFORMANCE APPRAISAL

- **Part I. Task / Duty Statements.** The performance standard must be objective and expressed in terms of quality, quantity, timeliness, expected results, manner or method of performance and show how the technician performed beyond the minimum level. The supervisor's standards should reflect organizational as well as individual duties and responsibilities, to include EEO and Safety as critical elements where applicable. The performance appraisal must be at the outstanding level and be for a period not less than one year. The employee must have been in his/her job/grade level for at least six months.



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PERFORMANCE APPRAISAL

- - **Part II. Comments.** Part II. Should be completed showing how the employee has performed at the outstanding rating level.
- - **Part III. Summary Rating.** This rating should be at the Outstanding Level.
- - **Part V. Certification.** All Signatures and Dates should be accomplished in the Standards and Critical Elements Signature Block and Appraisal Signature Block.



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POSITION DESCRIPTION

A copy of the employee's current position description should be attached as documentation of duties assigned to the employee's position.



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QSI CHECKLIST

1. Has the technician's overall performance for the previous 12 months been at the outstanding level?
2. Are all required signatures on the HRO 430-1, and is the form completed and dated?
3. Are items 1 - 9 completed on the NGB Form 32 and is there a certification statement that the technician's high quality of performance is likely to continue?



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QSI CHECKLIST

4. Has the technician recently (within the last 120 days) received or is about to receive a WIGI or promotion?
5. Is the QSI based in whole or in part upon a specific act or any period of service that serves as the basis for a previous award including Time Off Award?



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QSI CHECKLIST

6. Has there been an extended absence (in excess of 30 days) when determining the period of service to be recognized?
7. Has the technician received a QSI or SSP within the last three years?
8. When the NGB Form 32 is received in HRO, is the technician's current performance appraisal less than 30 days old?



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QSI CHECKLIST

9. Are Critical Elements Identified on HRO 430-1?
10. Is this a supervisor? If so, is there an EEO statement addressed, and is it a critical element?
11. Is this a General Schedule employee?
12. Is a current Position Description attached?



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QSI CHECKLIST

12. Is this a General Schedule employee?

13. Is a current Position Description attached?



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QUESTIONS

Are there any questions about
Quality Step Increase Awards?



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INCENTIVE AWARDS

**SUSTAINED
SUPERIOR
PERFORMANCE**



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SUSTAINED SUPERIOR PERFORMANCE

(Wage Grade (WG) & General Schedule (GS) Employees)

Payment of awards for SSP's will be determined by an outstanding performance appraisal and upon the Supervisor's and PMO's recommendation of 1 to 5 percent of base salary based on 2087 hours of performance.



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SUSTAINED SUPERIOR PERFORMANCE

HRO will provide assistance to the PMO to ensure funding targets are not exceeded due to awards. PMO's will establish controls to ensure that recommendations do not exceed funds that are available in the technician payroll account to support the program. PMO's will be provided designated fund amounts or percentages that may not be exceeded. This procedure eliminates award board requirement except for those technicians who are recommended for award for the third consecutive period of eligibility. Third consecutive eligibility period award nominees will be reviewed by a specially called Awards Board.



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REQUIRED DOCUMENTS

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- DETAILED STATEMENTS OF FACTS
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- POSITION DESCRIPTION (PD)



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NGB FORM 32

The technician's immediate supervisor is responsible for initiating incentive award nomination using NGB Form 32. (Complete blocks 1 - 10 and the Position Manager's signature in Part IV.)

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I. (TO BE COMPLETED BY OPERATING OFFICE)					
1. TYPE OF RECOMMENDATION					
2. BASIS FOR RECOMMENDATION (See reverse under "Evidence of Superior or Outstanding Achievement")					
☐ SUPERIOR PERFORMANCE		PERIOD		☐ SPECIAL ACT OR SERVICE	
3. DUTY ASSIGNMENT - DUTY TITLE - DUTY LOCATION (MOS, GRADE, etc.)		4. DUTY ASSIGNMENT TITLE, GRADE, DUTY AND SALARY			
5. DUTY ASSIGNMENT, RECOMMENDATION AND DISCUSSION		6. ORGANIZATION			
7. DUTY ASSIGNMENT, GRADE AND SALARY (Current and Recommended)		8. DUTY ASSIGNMENT (Include Zip Code)			
9. DUTY ASSIGNMENT AND TYPE OF RECOMMENDATION (See reverse)		10. DUTY ASSIGNMENT AND TYPE OF RECOMMENDATION (See reverse)			
II. (TO BE COMPLETED BY TECHNICIAN PERSONNEL OFFICE)					
TYPE AND DATE OF INCENTIVE AWARD(S) OR DATE OF QUALITY INCREASE(S) PREVIOUSLY GRANTED (except length of service)					
III. (TO BE COMPLETED BY LOCAL AWARDS COMMITTEE)					
11. RECOMMEND APPROVAL OF FOLLOWING AWARDS		☐ CASH		TOTAL AMOUNT	
12. TYPE:		☐ INTANGIBLE (BRIGHTS)		☐ TANGIBLE (SAVINGS)	
☐ DISAPPROVED		REASON AND DATE		DATE	
IV. (TO BE COMPLETED BY APPROPRIATE APPROVING AUTHORITY)					
APPROVING AUTHORITY	ACTION	ADDITIONAL CASH AWARD		SIGNATURE AND TITLE	
	APPR	DISAP	APPROVED	RECOMMEND	DATE
LOCAL COMMANDER	☐	☐			
STATE AWARDS COMMITTEE	☐	☐			
ADJUTANT GENERAL	☐	☐			
NGB INCENTIVE AWARDS BOARD	☐	☐			
(NOTICE TO EMPLOYEE)					
UPON ACCEPTANCE OF CASH AWARDS, THE USE OF THIS CONTRIBUTION BY THE UNITED STATES SHALL NOT FORM THE BASIS OF A FURTHER CLAIM OF ANY NATURE UPON THE UNITED STATES BY YOU, YOUR WIFE OR ASSIGNS.					
1. Attach explanation					

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DETAILED STATEMENT OF FACTS

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PERFORMANCE APPRAISAL

- **Part I. Task / Duty Statements.** The performance standard must be objective and expressed in terms of quality, quantity, timeliness, expected results, manner or method of performance and show how the technician performed beyond the minimum level. The supervisor's standards should reflect organizational as well as individual duties and responsibilities, to include EEO and Safety as critical elements where applicable. The performance appraisal must be at the outstanding level and be for a period not less than one year. The employee must have been in his/her job/grade level for at least six months.



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PERFORMANCE APPRAISAL

- - **Part II. Comments.** Part II. Should be completed showing how the employee has performed at the outstanding rating level.
- - **Part III. Summary Rating.** This rating should be at the Outstanding Level.
- - **Part V. Certification.** All Signatures and Dates should be accomplished in the Standards and Critical Elements Signature Block and Appraisal Signature Block.



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POSITION DESCRIPTION

A copy of the employee's current position description should be attached as documentation of duties assigned to the employee's position.



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SSP CHECKLIST

1. Has the technician's overall performance for the previous 12 months been at the outstanding level?
2. Are all required signatures on the HRO 430-1, and is the form completed and dated?
3. Are items 1 – 9 completed on the NGB Form 32?



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SSP CHECKLIST

4. Is the SSP based in whole or in part upon a specific act or any period of service that serves as the basis for a previous award including Time Off Award?
5. Has there been an extended absence (in excess of 30 days) when determining the period of service to be recognized?



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SSP CHECKLIST

6. Has the technician received a QSI or SSP within the last three years?
7. When the NGB Form 32 is received in HRO, is the technician's current performance appraisal less than 30 days old?
8. Are Critical Elements Identified on HRO 430-1?



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SSP CHECKLIST

9. Is this a supervisor? If so, is there an EEO statement addressed, and is it a critical element?
10. Is a current Position Description attached?



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QUESTIONS

Are there any questions about
Sustained Superior
Performance Awards?



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INCENTIVE AWARDS

CASH AWARDS



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CASH AWARD

A cash award is given for benefits resulting from the outstanding performance and the significance of a special act or service accomplished for the command.



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CASH AWARD

Cash awards are lump sum cash payments that are not basic pay for any purpose. An employee whose most recent performance rating was at the fully successful level or higher may be paid a cash award.

Cash awards may be awarded for up to 10% of the employees annual rate of basic pay.



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NGB FORM 32

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2. BASIS FOR RECOMMENDATION (See reverse under "Evidence of Superior or Outstanding Achievement")					
☐ SUPERIOR PERFORMANCE		PERIOD		☐ SPECIAL ACT OR SERVICE	
3. DUTY ASSIGNMENT - REASON FOR RECOMMENDATION		4. REASON FOR SPECIAL ACT, SERVICE, OR OTHER BASIS			
5. DUTY ASSIGNMENT, REASON FOR RECOMMENDATION		6. DUTY ASSIGNMENT			
7. REASON FOR SPECIAL ACT, SERVICE, OR OTHER BASIS		8. REASON FOR SPECIAL ACT, SERVICE, OR OTHER BASIS			
9. REASON FOR SPECIAL ACT, SERVICE, OR OTHER BASIS		10. REASON FOR SPECIAL ACT, SERVICE, OR OTHER BASIS			
II. (TO BE COMPLETED BY TECHNICIAN PERSONNEL OFFICE)					
TYPE AND DATE OF INCENTIVE AWARD(S) OR DATE OF QUALITY INCREASE(S) PREVIOUSLY GRANTED (except length of service)					
III. (TO BE COMPLETED BY LOCAL AWARDS COMMITTEE)					
11. RECOMMEND APPROVAL OF FOLLOWING AWARD		☐ CASH		TOTAL AMOUNT	
12. DISAPPROVED		REASON FOR DISAPPROVAL		DATE	
IV. (TO BE COMPLETED BY APPROPRIATE APPROVING AUTHORITY)					
APPROVING AUTHORITY	ACTION	APPROVED	RECOMMENDED	SIGNATURE AND TITLE	DATE
LOCAL COMMANDER	☐ ☐	☐	☐		
STATE AWARDS COMMITTEE	☐ ☐	☐	☐		
ADJUTANT GENERAL	☐ ☐	☐	☐		
NGB INCENTIVE AWARDS BOARD	☐ ☐	☐	☐		
NOTICE TO EMPLOYEE					
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PERFORMANCE APPRAISAL

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PERFORMANCE APPRAISAL

- - **Part II. Comments.** Part II. Should be completed showing how the employee has performed at the fully successful or higher rating level.
- - **Part III. Summary Rating.** This rating should be at the fully successful or higher level.
- - **Part V. Certification.** All Signatures and Dates should be accomplished in the Standards and Critical Elements Signature Block and Appraisal Signature Block.



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POSITION DESCRIPTION

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INCENTIVE AWARDS

SUGGESTION AWARDS



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INCENTIVE AWARDS

NON-MONETARY AWARDS



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NON-MONETARY AWARDS

- Time Off Award (TOA)
- Years of Service Certificates
- Retirement Certificates
- Years of Service Plaques



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